

ENDOCRINOLOGY WAIVERS

CONDITION: GOUT (ICD9 274.9)

Revised January 2002

AEROMEDICAL CONCERNS: Gout may often present with an acute, severe, often disabling arthritic attack, usually without warning. It may be associated with underlying disorders such as atherosclerosis, diabetes mellitus, hypertension, and renal disease.

WAIVERS:

Initial Applicants (All Classes): Exceptions to policy are considered on a case by case basis.

Rated Aviation Personnel (All Classes): Waivers are normally recommended when the aircrew member becomes asymptomatic and medication is tolerated without side effects.

INFORMATION REQUIRED:

- ❖ Confirmation of the absence of renal stones via an IVP or CT Scan is necessary for waiver.

FOLLOW-UP: Annual serum uric acid.

TREATMENT: For an acute gout attack, treatment can be one of three medications: 1) Colchicine, 2) Non-steroidal Antiinflammatory Drugs (NSAIDS), or 3) Intraarticular corticosteroid injection. In the aviation environment, the preferred initial therapy for gouty arthritis is treatment with NSAIDs. Treatment should be initiated rapidly as sooner treatment results in better patient response. If the condition recurs, a joint aspiration should be performed with fluid analysis to confirm the diagnosis. NSAIDs are a symptomatic treatment but long term control of hyperuricemia is via uricosuric drugs or allopurinol. Allopurinol or Probenecid are both acceptable therapies, provided there are no significant side effects.

DISCUSSION: In primary gout, 10-25 % of patients will develop renal stones. Fifty percent of those with a serum uric acid level greater than 13 mg/dl will develop renal stones. Starting treatment with Probenecid can precipitate stone formation in the kidney and the maintenance of an alkali diuresis at the start of treatment is recommended. In individuals at greater risk of developing renal stones, a large urinary volume through liberal ingestion of fluid should be maintained. Of relevance to aircrew is the association of gout with an increased level of alcohol consumption. Alcohol (Ethanol) increases uric acid production and reports indicate that of alcoholic beverages, beer may have the most potent effect on uric acid production.

Analysis of AEDR data indicates that in 2000, ten aircrew had the condition of gout and 50 % of these were granted waivers.

REFERENCE:

National Library of Medicine,
<http://www.nlm.nih.gov/medlineplus/goutandpseudogout.html>,